# STREET NAME CHANGE APPLICATION

**Updated: October, 2019** 



#### **CONTACT INFORMATION**

Applicant's Name	Applicant's Phone #	
Company	Company	
Applicant's Mailing Address	Applicant's Email	

#### PROPERTY INFORMATION

Number of Property Owners Affected:	
Number of Businesses Affected:	
NOTE: To be accepted as complete, more than 50% of the own addressed on this street must sign the accompanying petition.	ers of businesses and 50% of the owners of property
REQUESTED CHANGE	
Existing Street Name:	
Proposed Street Name:	
Description of Location: From the intersection of	to
Reason for Requested Change:	

### **AUTHORIZATION**

I certify that the information on this application is complete and accurate. I understand the fees and the process for this application. I understand my responsibility, as the applicant, to be present at meetings regarding this request.

Filing Fee \$212 Technology Fee \$13

TOTAL COST\* \$225

\*Total cost does not include the cost of replacing street signs, which is determined by the Public Services Director\*

Submittal of this digital Application shall constitute as acknowledgement and authorization to process this request.

# **APPLY ONLINE – WWW.MYGOVERNMENTONLINE.ORG/**



## **CHECKLIST FOR STREET NAME CHANGE APPLICATION**

The following items are requested for consideration of this application. These and additional items may be required at the request of the Department		Comments
	Pre-development meeting with staff is recommended  • Please visit <a href="http://sanmarcostx.gov/1123/Pre-Development-Meetings">http://sanmarcostx.gov/1123/Pre-Development-Meetings</a> to schedule	
	Completed Application for Street Name Change	
	Site Plan illustrating the area to be changed	
	Signatures from Property Owners and Businesses affected by / addressed on the street proposed to change (please provide as many pages as necessary)	
	Application Filing Fee \$212 Technology Fee \$13	

\*\*San Marcos Development Code Section 2.3.1.1(C): "Every application accepted by the responsible official for filing shall be subject to a determination of completeness...the responsible official is not required to review an application unless it is complete..."

## **CITY OF SAN MARCOS STREET NAME CHANGE PETITION**

By signing this	petition, I hereby reques	t the City Council of the City of San Marcos to change the street name
of	to	, as requested in the attached application form. I hereby affirm
that I am the le	egal owner of a busines:	s or property that receives its physical address (regardless of mailing
address) from t	his street. I understand t	hat it will be my responsibility to provide notification of my new address
to all interested	parties within one year o	of the effective date of this change.

Printed Name, Please print legibly	Physical Address On street to be changed	Mailing Address If not the same	Business Name If applicable	Signature

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By signing this petition, I hereby request the City Council of the City of San Marcos to change the street name						
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that I am the legal owner of a business or property that receives its physical address (regardless of mailing						
address) from this street. I understand that it will be my responsibility to provide notification of my new address						
to all interested parties within one year of the effective date of this change.						

Printed Name, Please print legibly	Physical Address On street to be changed	Mailing Address If not the same	Business Name If applicable	Signature